

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION

ALLSTATE INSURANCE COMPANY,  
Et Al.,  
Plaintiffs

vs.

RECEIVABLE FINANCE COMPANY,  
L.L.C, Et. Al.  
Defendants

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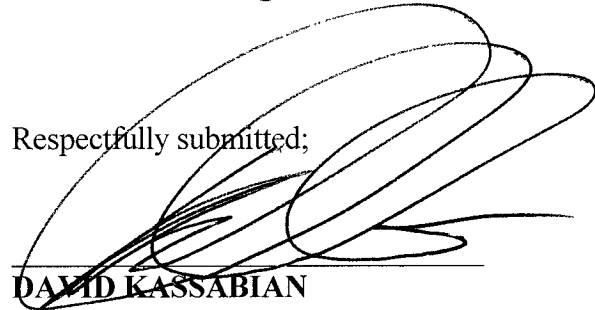
Civil Action No. 3-01CV2247-N

**APPENDIX TO PLAINTIFFS' MOTION TO COMPEL RESPONSE TO  
OVERDUE REQUESTS FOR PRODUCTION (DUE MAY 3, 2004)  
AND BRIEF IN SUPPORT THEREOF**

COME NOW the Plaintiffs and file this Appendix to their *Plaintiffs' Motion to Compel Response to Overdue Requests for Production (Due May 3, 2004) and Brief in Support Thereof*.

<u>Exhibit</u>	<u>Document</u>	<u>Page Numbers</u>
A	<i>Plaintiffs' Seventh Requests for Production to Defendant Accident &amp; Injury Pain Centers, Inc.</i>	1-5
B	Letter dated April 2, 2004	6-8
C	Hand delivery receipt from "Legal Eagle Courier Service, Inc."	9
D	PS Form 3811	10

Respectfully submitted;

A large, stylized handwritten signature in black ink, appearing to read 'DAVID KASSABIAN', is written over a horizontal line.


**DAVID KASSABIAN**  
**TEXAS STATE BAR NO. 11105600**  
**BRET WEATHERFORD**  
**TEXAS STATE BAR NO. 20998800**

**KASSABIAN, DOYLE &  
WEATHERFORD, P.C.**  
1521 North Cooper Street  
Suite 650, LB 21  
Arlington, TX 76011  
(817) 460-5099 (Local)  
(817) 461-8855 (Metro)  
(817) 274-9863 (Facsimile)

**ATTORNEYS FOR PLAINTIFFS**

### CERTIFICATE OF SERVICE

I hereby certify a copy of the foregoing Appendix has been served on the following attorneys for Defendants, by certified mail, return receipt requested, this 14<sup>th</sup> day of May, 2004:



Mr. Rick Disney  
Douglas, Wuester & Disney, P.C.  
Fort Worth Club Tower, Penthouse I-C  
777 Taylor Street  
Fort Worth, TX 76102-4919

Mr. Lindy Jones  
Jones, Allen & Fuquay, L.L.P.  
8828 Greenville Avenue  
Dallas, TX 75243

Mr. Michael Mears  
Andrews & Kurth, L.L.P.  
1717 Main Street, Suite 3700  
Dallas, TX 75201

Mr. Robert Renneker  
1412 Main Street  
Suite 210  
Dallas, TX 75202

Mr. James D. Shields  
Shields, Britton & Fraser  
5401 Village Creek Drive  
Plano, TX 75093

Mr. Chris Weil  
Weil & Petrocchi, P.C.  
1601 Elm Street, Suite 1900  
Dallas, Texas 75201-2846

Mr. Richard Young  
Glast, Phillips & Murrey, P.C.  
2200 One Galleria Tower  
13355 Noel Rd., LB 48  
Dallas, TX 75240-6657

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION

ALLSTATE INSURANCE COMPANY,  
et al  
Plaintiffs/Petitioners

vs.

RECEIVABLE FINANCE COMPANY,  
L.L.C, et al  
Defendants/Respondents

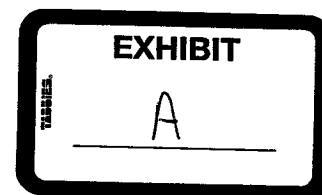
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Civil Action No. 3-01-CV2247-N

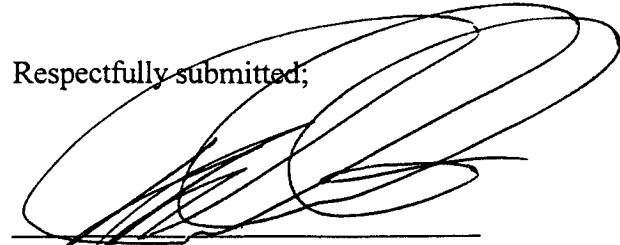
**PLAINTIFFS' SEVENTH REQUESTS FOR PRODUCTION TO  
DEFENDANT ACCIDENT & INJURY PAIN CENTERS, INC.**

TO: Accident & Injury Pain Centers, Inc., (d/b/a Accident & Injury  
Chiropractic), Defendant, by and through its attorney of record, Mr.  
Michael Mears, Andrews Kurth L.L.P., 1717 Main Street, Suite 3700,  
Dallas, TX 75201.

ALLSTATE INSURANCE COMPANY et al, Plaintiffs in the above entitled  
and numbered cause, submits the following Seventh Request for Production of Documents  
to Accident & Injury Pain Centers, Inc., (d/b/a Accident & Injury Chiropractic).  
Defendant, pursuant to Rule 34, Federal Rules of Civil Procedure, requesting that the  
documents and things hereinafter described be produced at the offices of Kassabian, Doyle  
& Weatherford, P.C., 1521 N. Cooper Street, Suite 650, LB 21, Arlington, Texas  
76011, within thirty (30) days from the date of service hereof.



Respectfully submitted;

A large, stylized handwritten signature in black ink, appearing to read 'David Kassabian', is written over a horizontal line.

**DAVID KASSABIAN**  
**TEXAS STATE BAR NO. 11105600**  
**BRET WEATHERFORD**  
**TEXAS STATE BAR NO. 20998800**

**KASSABIAN DOYLE &  
WEATHERFORD, P.C.**

1521 North Cooper Street  
Suite 650, LB 21  
Arlington, TX 76011  
(817) 460-5099 (Local)  
(817) 461-8855 (Metro)  
(817) 274-9863 (Facsimile)

**ATTORNEYS FOR PLAINTIFFS**

**CERTIFICATE OF SERVICE**

I hereby certify that Plaintiffs' Seventh Request for Production has been served on Defendant's counsel, by and through its attorney of record, Mr. Michael Mears, Andrews Kurth, L.L.P., 1717 Main Street, Suite 3700, Dallas, TX 75201, by hand delivery, and all other counsel of record, by certified mail, return receipt requested, this 2nd day of April 2004.

Burt W. Featherston

Definitions and Instructions applicable to these requests:

“You,” “Your,” or “Accident & Injury” shall refer to Accident & Injury Pain Centers, Inc.

Any request for a document, correspondence, or other item shall include documents, correspondence, or other items transmitted or maintained electronically.

**REQUEST FOR PRODUCTION NO. 1:**

In regard to the patients identified in Exhibits A and B to Plaintiffs' Third Amended Disclosures, copies of the electronically stored portion of the patient file, such as notes, forms, and other documents. This request includes, but is not limited to, the “Eclipse” system notes referenced by Tina Cheshire during her March 31, 2004 deposition.

**REQUEST FOR PRODUCTION NO. 2:**

In regard to the patients of the “approximately 300” Personal Injury Protection (PIP) claims referenced by Accident & Injury's counsel during the October 1, 2003 deposition of Bruce Vest (see page 177 of the deposition), copies of the electronically stored portion of the patient file, such as notes, forms, and other documents. This request includes, but is not limited to, the “Eclipse” system notes of which Tina Cheshire testified during her March 31, 2004 deposition.

**REQUEST FOR PRODUCTION NO. 3:**

In regard to any other patients that Accident & Injury contends should be included in the ‘pool’ or ‘population’ of patients from which a random sample could be drawn in regard to this lawsuit, copies of the electronically stored portion of the patient file, such as notes, forms, and other documents. This request includes, but is not limited to, the “Eclipse” system notes referenced by Tina Cheshire during her March 31, 2004 deposition.

**REQUEST FOR PRODUCTION NO. 4:**

Copies of any standing, general, or “blanket” Letters of Protection between Accident & Injury, and any attorneys or law offices, for the period January 1, 1998 to the present. This request includes, but is not limited to, the “blanket” letters of protection of which Tina Cheshire testified during her March 31, 2004 deposition.

**REQUEST FOR PRODUCTION NO. 5:**

Copies of any documents, such as letters or memorandum, in which Accident & Injury alleged Dr. James Laughlin, D.O., committed fraud or engaged in unethical and/or illegal activities in regard to the examination or treatment of patients, for the period January 1, 1999 to the present.

**REQUEST FOR PRODUCTION NO. 6:**

Copies of any documents, such as letters or memorandum, received by Accident & Injury from Dr. James Laughlin, D.O., or Dr. Laughlin’s representatives or agents, responding to any allegations by Accident & Injury that Dr. Laughlin committed fraud or engaged in unethical and/or illegal activities in regard to the examination or treatment of patients.



LAW OFFICES OF

**KASSABIAN, DOYLE & WEATHERFORD**

DAVID KASSABIAN  
BOARD CERTIFIED  
CIVIL TRIAL LAW  
PERSONAL INJURY TRIAL LAW  
TEXAS BOARD OF LEGAL SPECIALIZATION

A PROFESSIONAL CORPORATION  
1521 NORTH COOPER STREET  
SUITE 650, LB 21  
ARLINGTON, TEXAS 76011

LOCAL (817) 460-5099  
METRO (817) 461-8855  
FAX (817) 274-9863

April 2, 2004

Mr. Michael Mears  
Andrews & Kurth, L.L.P.  
1717 Main Street, Suite 3700  
Dallas, TX 75201

**HAND DELIVERED**

**RE: CASE NO: 3-01-CV2247-N**  
**ALLSTATE INSURANCE COMPANY, ET AL. V. RECEIVABLE FINANCE**  
**COMPANY, L.L.C., ET. AL.**

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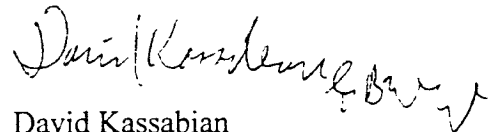
Dear Mr. Mears:

Enclosed please find Plaintiffs' Seventh Requests for Production to Defendant Accident & Injury Pain Centers, Inc.

By copy of this letter, we are forwarding a copy of said document to all other defense counsel, via certified mail, return receipt requested.

I appreciate your attention to this matter.

Sincerely,

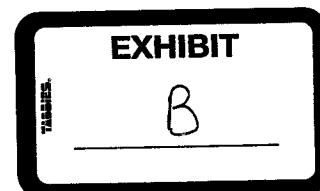


David Kassabian

/sbc

Enclosures

c: Ms. Karen Mitchell  
United States District Clerk  
14A20 Federal Building  
1100 Commerce Street  
Dallas, TX 75242  
(w/out enclosure)



①

Mr. Michael Mears  
April 2, 2004  
Page 2

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c: Mr. Rick Disney  
Douglas, Wuester & Disney, P.C.  
Fort Worth Club Tower, Penthouse I-C  
777 Taylor Street  
Fort Worth, TX 76102-4919  
**CM/RRR 7003 2260 0004 9351 0697**

Mr. Richard Young  
GLAST, PHILLIPS & YOUNG, P.C.  
2200 One Galleria Tower  
13355 Noel Rd., LB 48  
Dallas, TX 75240-6657  
**CM/RRR 7003 2260 0004 9351 0703**

Mr. Robert Renneker  
1412 Main Street  
Suite 210  
Dallas, TX 75202  
**CM/RRR 7003 2260 0004 9351 0710**

Mr. James D. Shields  
Ms. Katherine DiSorbo  
Shields, Britton & Fraser  
5401 Village Creek Drive  
Plano, TX 75093  
**CM/RRR 7003 2260 0004 9351 0727**

Mr. Chris Weil  
Weil & Petrocchi, P.C.  
1601 Elm Street, Suite 1900  
Dallas, Texas 75201-2846  
**CM/RRR 7003 2260 0004 9351 0734**

Mr. Michael Mears  
March 30, 2004  
Page 3

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c: Mr. Lindy Jones  
JONES, ALLEN & FUQUAY, L.L.P  
8828 Greenville Avenue  
Dallas, TX 75243  
**CM/RRR 7003 2260 0004 9351 0741**

Bill To: <u>KD + C</u>		Deliver To: <u>Michael Meigs</u>	
		<u>1717 Main St.</u>	
		<u>Dallas TX 75201</u>	
Contact: <u>Michael</u>	Ph: <u>817/441-8855</u>	Contact:	Ph:
Pickup Point: <u>KD + C</u>			
Driver Name: <u>Michael</u>	Pick Up Time: <u>2:30</u>	Delivery Time: <u>3:30</u>	
Person at P/U: <u>5244</u>		Printed Name:	
Return Time:		Delivery Signature: <u>[Signature]</u>	
		Return Signature: <u>[Signature]</u>	
Driver Comments: <u>Delivered</u>			
Cause #: <u>Mapsco Page: <u>10/10/01</u></u>			
Client: <u>Ref: <u>444</u></u> Date: <u>4/2/04</u>			



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 Call 817-860-8802  
 For All Your Delivery Needs!  
 "Messenger To The Metroplex"

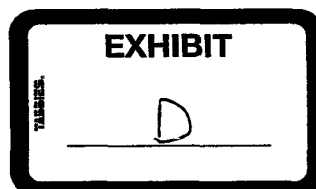
Since 1999  
 legaleaglecourier.com

EXHIBIT

C

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SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to:</p> <p>Mr. Lindy Jones ONES, ALLEN &amp; FUQUAY, L.L.P. 828 Greenville Avenue Dallas, TX 75243</p>		<p>A. Signature <input type="checkbox"/> Agent</p> <p><i>[Signature]</i> <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7003 2260 0004 9351 0741</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-15-40</p>			



(10)